

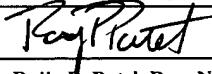


19-27-04

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TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>		Application Number	10/766,572
		Filing Date	January 27, 2004
		First Named Inventor	Adam Crossland
		Group Art Unit Number	2171
		Examiner Name	Not yet known
Total Number of Pages in This Submission	5	Attorney Docket Number	23983-08664

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input checked="" type="checkbox"/> Check Enclosed <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): <input type="checkbox"/> [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT			
Signature:			
Attorney/Reg. No.:	Rajiv P. Patel, Reg. No. 39,327	Dated:	December 21, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.			
Signature:			
Typed or Printed Name:	Rajiv P. Patel	Dated:	December 21, 2004
Express Mail Mailing Number (optional): EV 441504202 US			



IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

APPLICANTS: Adam Crossland, Greg Arzoomanian, David Koehn, Peter Allen, Robert J. Macartney and Anthony A. Nassar

APPLICATION NO: 10/766,572

FILING DATE: January 27, 2004

TITLE: Distributed Application Infrastructure for the Purpose of Ad Hoc Networks and Intermittently Connected Devices

EXAMINER: Not yet known

GROUP ART UNIT: 2171

ATTY. DKT. NO.: 23983-08664

CERTIFICATE OF MAILING

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Dated: December 21, 2004

By: 
Rajiv P. Patel, Reg. No. 39,327

MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

PETITION FOR EXTENSION OF TIME

SIR:

Applicant hereby petitions for an extension of time of

Term of Extension	Small Entity	Other than a Small Entity
<input type="checkbox"/> 1 month	<input type="checkbox"/> \$ 60.00	<input type="checkbox"/> \$ 120.00
<input type="checkbox"/> 2 months	<input type="checkbox"/> \$225.00	<input type="checkbox"/> \$ 450.00
<input type="checkbox"/> 3 months	<input type="checkbox"/> \$510.00	<input type="checkbox"/> \$ 1020.00
<input checked="" type="checkbox"/> 4 months	<input checked="" type="checkbox"/> \$795.00	<input type="checkbox"/> \$1,590.00

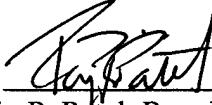
for responding to the Patent Office communication mailed June 21, 2004.

PATENT

Enclosed herewith is payment in the amount of \$795.00 for the fee for the extension of time, calculated as indicated above.

Respectfully submitted,
Adam Crossland, Greg Arzoomanian, David Koehn,
Peter Allen, Robert J. Macartney and
Anthony A. Nassar

Dated: December 21, 2004

By: 
Rajiv P. Patel, Reg. No. 39,327
FENWICK & WEST LLP
Silicon Valley Center
801 California Street
Mountain View, CA 94041
Tel.: (650) 335-7607
Fax: (650) 938-5200



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$)** 795.00

Complete if Known	
Application Number	10/766,572
Filing Date	January 27, 2004
First Named Inventor	Adam Crossland
Examiner Name	Not yet known
Art Unit	2171
Attorney Docket No.	23983-08664

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None
 Deposit Account:

Deposit Account Number

19-2555

Deposit Account Name

Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)
 Charge fee(s) indicated below Credit any overpayments
 Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee	Fee	Fee	Fee	Fee Description	Fee Paid
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Code	Fee (\$)	Code	Fee (\$)						
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SUBTOTAL (1) **(\$)** 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
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Independent Claims	-20** =	X	=
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Multiple Dependent	-3** =	X	=
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Large Entity	Small Entity
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Fee	Fee	Fee	Fee	Fee Description
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Code	Fee (\$)	Code	Fee (\$)	
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1202	50	2202	25	Claims in excess of 20
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1201	200	2201	100	Independent claims in excess of 3
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1203	360	2203	180	Multiple dependent claim, if not paid
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1204	200	2204	100	**Reissue independent claims over original patent
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1205	50	2205	25	**Reissue claims in excess of 20 and over original patent
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SUBTOTAL (2) **(\$)** 0.00

**or number previously paid, if greater; For Reissues, see above

•Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\$)** 795.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	120	2251	60
1252	450	2252	225
1253	1020	2253	510
1254	1,590	2254	795
1255	2,160	2255	1,080
1401	500	2401	250
1402	500	2402	250
1403	1000	2403	500
1451	1,510	1451	1,510
1452	500	2452	250
1453	1,500	2453	750
1501	1,400	2501	700
1502	800	2502	400
1503	1100	2503	550
1460	—	1460	—
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	790	2809	395
1810	790	2810	395
1801	790	2801	395
1802	900	1802	900
Other fee (specify) _____			

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Rajiv P. Patel	Registration No. (Attorney/Agent)	39,327	Telephone (650) 335-7607
Signature		Date	December 21, 2004	